

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S09028

FILED  
Mar 21, 2008  
Secretary of State

Entity Name: SUNSHINE AIR CONDITIONING, INC.

## Current Principal Place of Business:

12550 S. HWY 441  
BELLEVIEW, FL 34420 US

## New Principal Place of Business:

## Current Mailing Address:

12550 S. HWY 441  
BELLEVIEW, FL 34420 US

## New Mailing Address:

FEI Number: 59-3034482

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HOFFMAN, PAUL A  
10545 SE 151ST ST.  
SUMMERFIELD, FL 34491 US

## Name and Address of New Registered Agent:

HOFFMAN, PAUL A  
10545 SE 151ST ST  
SUMMERFIELD, FL 34491 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: CANDY C HOFFMAN

03/21/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HOFFMAN, PAUL A,  
Address: 12550 S. HWY 441  
City-St-Zip: BELLEVIEW, FL 34420

Title: VTS ( ) Delete  
Name: HOFFMAN, CANDY C,  
Address: 12550 S. HWY 441  
City-St-Zip: BELLEVIEW, FL 34420

Title: D ( ) Delete  
Name: HOFFMAN, CANDY C,  
Address: 12550 S HWY. 441  
City-St-Zip: BELLEVIEW, FL 34420

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CANDY C HOFFMAN

VP

03/21/2008

Electronic Signature of Signing Officer or Director

Date